

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED	AFTER		AFTER		IND.	DEP.
	1st AMENDMENT	IND.	DEP.	2nd AMENDMENT		
1	/					
2	/					
3	/					
4	/					
5	2					
6	1					
7	2					
8	1					
9	2					
10	2					
11	2					
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50						
TOTAL	5					
TOTAL IND.	5					
TOTAL DEP.	0					
TOTAL CLAIMS	5					

5/1360/2004

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5/1360/2004

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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